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DECLARATION AND POWER OF ATTORNEY U.S.A.

FOR ATTORNEYS' USE ONLY
ATTORNEYS' DOCKET NO.
5883/P68255US2

33065

ZIP CODE

Florida

STATE OR COUNTRY

MIDDLE NAME

COUNTRY OF CITIZENSHIP

ALL'PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON-PRIORITY; OR PROVISIONAL APPLICATIONS

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_	As a below name first and sole inve	id inventor, I declare that my re entor (if only one name is listed	residence, post office address and I at 201 below), or an original, first a	i citizenship are states and joint inventor (if pl	d below next to lural inventors	o my name, the inion are named below at:	mation gr 201-203,	ven herein is true, that i b , or on additional sheets at	elieve that I am the ongini tached hereto) of the subje		
₹	first and sole inventor (if only one name is listed at 201 below), or an original, first and joint inventor (if plural inventors are named below at 201-203, or on additional sheets attached hereto) of the subject matter which is claimed and for which patent is sought on the invention entitled:										
7	SIGN HOLDER										
킼	1 which is describe	ed and claimed in:	PCT International Application	n No				filed			
צ	x the attached		=								
	Ine attached	specification	the specification in application						·		
	I harabu etata thi	! have reviewed and undered	(if applicable) and amende		i-eluding the	eleime ee amandad l	onv or	dmont referred to abo			
	I acknowledge the	ne duty to disclose information i	stand the contents of the above-ide which is material to patentability a	as defined in Title 37,	, Code of Fede	eral Regulations, §1.5	56.				
		I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:									
	Prior Foreign App	·				,		Priority Claim	ned		
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	(Number)		(Country)	(Country) (Day/				Yes	No No		
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٦	(Number)		(Country)	(Country) (Day			Day/Month/Year Filed)		No		
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	(Number)		(Country)	•	(Day/N	Month/Year Filed)		Yes 1	No		
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	•		d States Code,§119(e) of any Unit	·							
	Application No.		Filing Date December		•	on No. <u>60/478,834</u>	<u></u>		June 17, 2003		
			d States Code, §120 of any United in the manner provided by the firs								
3	patentability as d		deral Regulations, §1.56 which be								
1	application:							•	•		
J	(Ap	pplication Senal No.)		(Filing Date)			(Status:	: patented, pending, aband	doned)		
O۱		,	r, I hereby appoint the following	o attorneys (Regist	ration No.) to	o prosecute this an	nlication	n receive and action in:	structions from my ager		
nd	transact all busin	ness in the Patent and Trad	demark Office connected there	ewith, HARVEY B.	JACOBSO	N. JR. (20.851); JC	ÓHN CL	ARKE HOLMAN (22,7)	69); MARVIN R. STER		
		MELSER (27,215); MICHA 307) and NATHANIEL A. HI	AEL R. SLOBASKY (26,421);	JONATHAN L. SC	CHERER (29),851); IRWIN M. A	AISENB	ERG (19,007); WILLIA	M E. PLAYER (31,409		
<u> </u>	<u></u>	·				7 - 12 - 23 - 24 - 24 -					
	SEND CO	RRESPONDENCE TO:	CUSTOMER NO. 00136 or		DIRECT TELEPHONE CAL				LLS TO: /'s Docket No.) (202) 638-6666		
		JAC	COBSON HOLMAN	1400			110) 0 0001101	BSON HOLMAN			
			NAL LIMITED LIABILITY COI								
		400 WA			PROFES!	SIONA	L LIMITED LIABILI	ITY COMPANY			
_		VV M	ASHINGTON, D.C. 20004			<u></u>			 		
İ'n۷	ventor(s) name	must include at least of	one unabbreviated first or	middle name.							
T	FULL NAME *	FAMILY NAME		GIVEN NAME		N	MIDDLE NAME				
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ſ	POSZEWAND P	POST OFFICE ADDRESS	S	CITY STATE OR			OR COUNTRY	ZIP CODE			
1	ADDRESS	8736 Via An	icho		Boca Ra	aton		Florida	33433		
十	FULL NAME *	FAMILY NAME		GIVEN NAME			<u>Ja</u>	MIDDLE NAME			
L	OF INVENTOR	<u> </u>	ROJAS			Ralph					
٧ĺ	RESIDENCE &	ì		STATE OR FOR		ITRY		COUNTRY OF CITIZEN			
ᢤ	CITIZENSHIP	Miami					127,75	U.S.			
- 1	POST OFFICE	POST OFFICE ADDRESS	5	CITY			SIAIL	OR COUNTRY	ZIP CODE		

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the weight of the application or any patent issuing thereon.

GIVEN NAME

Miami

STATE OR FOREIGN COUNTRY

SIGNATURE OF INVENTOR 201* SIGNAT	24/		MOA:	202*	SIGNATURE OF INVENTOR 203*
DATE /1/20/03 DATE	工	M	159	03	DATE

Additional inventors are named on separately numbered sheets attached hereto.

16331 NW 37th Court

FAMILY NAME

POST OFFICE ADDRESS

CITY

ADDRESS

FULL NAME *

OF INVENTOR RESIDENCE &

CITIZENSHIP POST OFFICE

ADDRESS

Law Offices of

JACOBSON HOLMAN

PROFESSIONAL LIMITED LIABILITY COMPANY THE JENIFER BUILDING 400 SEVENTH STREET, N.W. WASHINGTON, DC 20004

Attny's Docket No. __5883/P68255US2

SMALL ENTITY DECLARATION

[37 CFR 1.9(c-f)]

Each unders	igned decl	ares that:	0							
((1) x the application attached hereto.									
(2	2) 🔲 (U.S. Application Serial No.		, filed						
		U.S. Patent No.								
is entitled to virtue of the	the benefit following:	ts of "small entity" status for paying reduc	ced fees under 3	5 USC 41(a) and (b) to the Patent a	and Trademark Office by					
as defined in		Each undersigned declares that he/she of .9(c).	qualifies as an in	dependent inventor, or would qualif	y had he/she made the					
(5) The undersigned declares that he/she is an official empowered to act on behalf of the concern identified below; that concern qualifies as a small business concern as defined in 37 CFR 1.9(d); that exclusive rights to the invention have been conveyed to and remain with the small business concern, or if the rights are not exclusive, that all other rights belong to small entities as defined in 37 CFR 1.9.										
		The undersigned declares that he/she is a as a nonprofit organization as defined in	an official empow	ered to act on behalf of the organizat	tion identified below; that					
	(a) 37 CFR 1.9(e)(1)									
	(b) 37 CFR 1.9(e)(2)									
	(c) 37 CFR 1.9(e)(3)									
	(d)	37 CFR 1.9(e)(4) State	e law of		;					
	that exclusive rights to the invention have been conveyed to and remain with the organization, or if the rights are not exclusive, that all other rights belong to organizations as defined in 37 CFR 1.9.									
	(7) Each person, concern or organization to which I/we have assigned, granted, conveyed or licensed, or am under an under contract or law to assign, grant, convey, or license any rights in the invention is listed below:									
	(a) no such person, concern or organization									
	(b)									
[a s	a separate tatus as "s	declaration is required from <u>each</u> named mall entities."]	person, concern	or organization having rights to this i	nvention averring to their					
Full Name										
Address	_1850 S	pectrum Boulevard. Fort Lauderdale	e. Florida 3330	9						
		Individual X Small Bus	iness Concern	Nonprofit Organiz	ation					
entity prior to	paying, o	e duty to file, in this application or patent r at the time of paying, the earliest of the is opriate. (37 CFR 1.28(b))								
are believed by fine or imp	to be true; orisonment	all statements made herein of his/her ow and further that these statements were n , or both, under Section 1001 of Title 18 of cation, any patent issued thereon, or any	nade with the kno f the United State	wledge that willful false statements s Code and that such willful false sta	so made are punishable					
3)	B)									
		Typed Name of Inventor	Signature		Date					
		Typed Name of Inventor	Signature		Date					
		Typed Name of Inventor	Signature		Date					
Typed Name of Inventor Signature Date (9) FAST INDUSTRIES, LTD.										
Name of Small Business Concern or Monprotit Organization										
		ob Fast	ВуУл	ucorfast	11/20/03					
	• •	ed Name <u>sident f Fast Industries, LLC, a Gene</u>	Signature eral Partner		Date /					
	Title of Signatory									